

JUN 04 2018

Page 1 of 6

UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENTFORM B  
For New Members, Candidates, and New Employees

LEGISLATIVE RESOURCE CENTER

18 JUN 12 AM 10:19

Name: DAL LA MAGNA Daytime Telephone: \_\_\_\_\_U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

FILER STATUS	<input checked="" type="checkbox"/> New Member of or Candidate for U.S. House of Representatives	State: <u>NY</u> District: <u>19</u>	<input type="checkbox"/> Check if Amendment
	<input type="checkbox"/> Candidates - Date of Election: <u>NOV 6 2018</u>		
FILER STATUS	<input type="checkbox"/> New Officer or Employee	Employing Office: _____	Period Covered: January 1, <u>2017</u> to <u>JUNE 1, 2018</u>
	<input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant		

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

## PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <u>or</u> b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes <input type="checkbox"/> No <input type="checkbox"/>

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"  
THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

## EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Page 2 of 6

**Use additional sheets if more space is required.**

Page 3 of 6

**Use additional sheets if more space is required**

Name: Dal LaMagna Page ____ of ____					
<b>SCHEDULE A - ASSETS &amp; UNEARNED INCOME</b>		<b>Value of Asset</b>	<b>Type of Income</b>	<b>Amount of Income</b>	
		Cost Amount		Current Year	Preceding Year
Domini Social Investments LLC		3,647,991.34	Partnership Income	None	\$100,000-\$1,000,000
Kos Media LLC		197,173.00	Partnership Income	None	\$100,000-\$1,000,001
Margaret O'leary, Inc. (Sub S)		464,139.88	Partnership Income	None	\$50,000-\$100,000
Small World Trading Corp (Sub S) (EO Nat)		500,000.00	Partnership Income	None	\$100,000-\$1,000,000
Momma Chia, LLC		73,698.00	Partnership Income	None	\$1,001-\$2,500
Booxby		100,000.00	Partnership Income	None	None
CNS Communications Dying To Know		50,000.00	Partnership Income	None	None
Doubling Thomas (McFadden)		150,000.00	Partnership Income	None	None
Earcrush		99,999.98	Partnership Income	None	None
Enteris		250,000.00	Partnership Income	None	None
The Last Dalai Lama		160,500.00	Partnership Income	None	None
Earthstone International, LLC		339,980.27	Partnership Income	None	None
Growstone, LLC		335,000.00	Partnership Income	None	None
IceStone, LLC		3,000,000.00	Partnership Income	None	None
MeOhMy		25,000.00	Partnership Income	None	None
Ntercept, LLC 128349 SeriesA Preferred		100,000.00	Partnership Income	None	None
One World Futbol Project LLC		17,069.00	Partnership Income	None	None
Ubiquity		100,000.00	Partnership Income	None	None
Undercare, Inc.		126,562.50	Partnership Income	None	None
<b>Investment Property</b>					
7th Avenue Poulsbo Rear		384,349.00	Rent	None	None
7th Avenue Poulsbo Street		363,593.00	Rent	None	None
Germantown Land		431,547.00	Rent	None	None
Lot C Sherman Hill Poulsbo		90,000.00	Rent	None	None
Rte 3 Poulsbo		12,065.00	Rent	None	None
Peterson Road		172,690.00	Rent	None	None
Browns Pond Road		39,373.45	Rent	None	None

# SCHEDULE D - LIABILITIES

Name: **DAL LANAUNA**

Page **5** of **6**

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A \$10,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Liability)
	Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
	LARRY & JOYCE WILKINS	1/2018	LOAN				X							
	CARLA REUBEN/TRUST	1/2018	LOAN				X							
	SPEDMAN SACH N.Y.	7/2015	MORTGAGE						X					
	LIBERTY BANK POWERS	8/2016	MORTGAGE						X					

# SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations), and positions solely of an honorary nature. **New Members and second-year candidates** report positions held in the reporting period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and two previous years.

Position	Name of Organization
CEO, MANAGING PARTNER	ICESTONE, LLC
BOARD OF DIRECTORS	STAMP STAMPEDE

